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25179 7590 09/12/2005

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<i>R. William Graham</i>	(Depositor's name)
<i>[Signature]</i>	(Signature)
<i>12-12-05</i>	(Date)

12/13/2005 TBESHAN2 00000055 10035845

01 FC:2501
02 FC:1504700.00 OP
300.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/035,845	12/24/2001	William H. Reeves	L-00003-004	4172

TITLE OF INVENTION: APPARATUS AND METHOD OF USE FOR IDENTIFYING AND MONITORING WOMEN AT RISK OF DEVELOPING OVARIAN SURFACE EPITHELIUM DERIVED CARCINOMAS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	12/12/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
FOREMAN, JONATHAN M	3736	600-562000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 *R. William Graham*

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Lifeline Biotechnologies, Inc

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

*Reno, NV*Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____

Typed or printed name *R. William Graham*Date *12-12-05*Registration No. *33,891*

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